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NO. OF PAGES: COVER SHEET PLUS 24 PAGE(S)TO: Examiner Noah P. Kamen G.A.U. 3747FAX TELEPHONE NO.: 571-273-8300FROM: John V. MoriartyDATE: August 31, 2006 CONFIRMATION OF RECEIPT REQUESTED IF CHECKED. WILL BY MAIL BY COURIER

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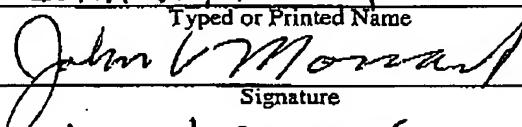
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4174-10 WEMMH PTO/SB/21 (08-04)
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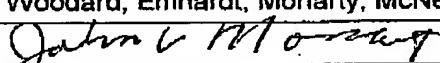
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Application Number	10/512,122
Filing Date	01/30/2006
First Named Inventor	Desmond Jay Maslen
Art Unit	3747
Examiner Name	Noah P. Kamen
Total Number of Pages in this Submission	5754-2

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Credit Card Payment Form	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
<input type="checkbox"/> Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Woodard, Emhardt, Moriarty, McNett & Henry LLP		
Signature			
Printed Name	John V. Moriarty		
Date	August 31, 2006	Reg. No.	26,2007

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SB/17 (01-06)

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Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

Complete If Known

FEE TRANSMITTAL
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AUG 31 2006

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$60.00)

Application Number 10/512,122

Filing Date 01/30/2006

First Named Inventor Desmond Jay Maslen

Examiner Name Noah P. Kamen

Art Unit 3747

Attorney Docket No. 5754-2

METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Order None Other (please identify): _____ Deposit Account Deposit Account number: 23-3030 Deposit Account Name: Woodard, Emhardt, Moriarty, McNeill & Henry LLP

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (Including Reissues)

Small Entity

Fee (\$)

Fee (\$)

Each Independent claim over 3 (including Reissues)

Fee (\$)

Fee (\$)

Multiple dependent claims

Fee (\$)

Fee (\$)

Total Claims Extra Claims Fee (\$)

Fee Paid (\$)

13 -20 or HP =0 x0 =1

Fee (\$)

Fee (\$)

HP = highest number of total claims paid for, if greater than 20

Independent Claims Extra Claims Fee (\$)

Fee Paid (\$)

3 -3 or HP =0 x0 =1

Fee (\$)

Fee (\$)

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 C.F.R. 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)

Fee Paid (\$)

-100 = /50 = (round up to a whole number) x

Fee Paid (\$)

0

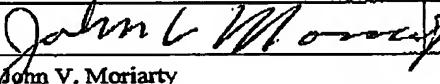
4. OTHER FEE(S)

1 Month Extension of Time

Fee Paid (\$)

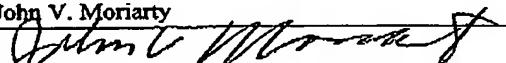
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SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	26,207	Telephone	(317) 634-3456
Name (Print/Type)	John V. Moriarty			Date	August 31, 2006

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